## CITY OF EUREKA PARK USE PERMIT

I.	PARK:				_			
	EVENT		EST. ATTE	NDANCE				
	FACIL	_						
	DATE (S	3)	HOUR		_			
II.	NAME	NAME OF INDIVIDUAL						
	ADDRES	SS	TELEPHONE (H	IM)	_			
	ORGAN	ZATION	TELEPHONE (	(WK)	_			
III.	CONDI	TIONS OF PERMIT						
	<ul> <li>A. The City of Eureka reserves the right to refuse or recall B. No alcoholic beverages allowed on premises.</li> <li>C. Do not permanently affix anything to City property.</li> <li>D. Contact the Public Works Department at 441-4241 to cancel reservation.</li> <li>E. A \$50.00 security deposit may be required upon reserving processed facilities. The deposit is refunded only if the facility surrounding grounds are cleaned upon completion of the event of the deposit is refunded only if the facility surrounding grounds are cleaned upon completion of the event of the deposit is refunded only if the facility surrounding grounds are cleaned upon completion of the event of the deposit is refunded in the contract hours.</li> <li>G. You are required to abide and adhere to the contract hours.</li> <li>H. Your signature below agrees that while your organization of facilities made available by the City of Eureka, you will discriminate on the basis of disability.</li> <li>I. All activities must be concluded by 11:00 p.m.</li> <li>J. Commercial uses of park facilities are prohibited except a under the Eureka Municipal Code, Section 93.56.</li> <li>K. THE UNDERSIGNED DECLARES THAT FACTS STATED IN THIS APPLICATIONE AND CORRECT AND WILL ABIDE BY ALL TERMS AND CONDITION HEREIN AND CONTAINED IN THE ATTACHED CITY OF EUREKA POLICY RECREATION FACILITY RENTALS.</li> <li>L. Insurance is required and will apply to all activities con with this event.</li> </ul>				your  park and ent. oved. g deposit. s. uses these not  as allowed  ATION ARE NS AS STATED Y FOR USE OF			
IV.		AND INSURANCE FEE						
		(plus Kit Carson Pa Sacco Amp		s Kit h Sports = S it = S O deposit = S	5 16.00 5			
		NCE IS REQUIRED - I			<b></b>			
	RETURI	CONTRACT BY		AMOUNT DUE = S				

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## V. WAIVER

I hereby waive, release and discharge any and all claims for damages for death, personal injury or property damage which I may have, or which hereafter accrue to me, against the City as a result of my rental of this facility. This release is also intended to provide defense and indemnification to the City, its officers, officials, employees and volunteers, any other involved municipalities or public agencies for any liability arising out of or connected in any way with my rental of this facility, even though that liability may arise out of the negligence or carelessness on the part of the persons or agencies mentioned above. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns.

Other than those City of Eureka employees who are specifically assigned to assist in or monitor this event, it is understood by the City and the Contract Holder that any and all employees and volunteers working on the contracted event are employees or volunteers of the Contract Holder and not the City of Eureka. Any and all liability associated with activities of the Contract Holder's employees or volunteers, including workers' compensation, is the sole responsibility of the Contract Holder and not the City of Eureka.

SIGNATURE OF APPLICANT	DATE					
AUTHORIZING CITY OFFICIAL DATE						
OFFICE USE ONLY						
Date Paid Dep	Date Paid Balance	Date of refund				
Receipt #	Receipt #	Refund #				
Staff Initials		Refund Amt				